



DECLARATION FOR PATENT APPLICATION

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled *Apparatus and Method for Calculating and Implementing a Fibonacci mask for a Code Generator*, the specification of which

[x]	is attached here	to.			
[]		rial Noed on	as (if applicable)		
I hereby state specification, includi			stand the contents on amendment refer		entified
I acknowledg to be material to pate			ent Office all inform	ation known	to me
I hereby clain any foreign application identified below any before that of the app	on(s) for patent of foreign application	r inventor's ce on for patent o	r inventor's certifica	and have also)
Prior Foreign Application(s)				Priority Claimed	
(Number)	(Country	y)	(Date Filed)	Yes []	No []
I hereby claim States application(s) this application is no by the first paragraph disclose to the Patent defined in 37 C.F.R. the national or PCT i	listed below and, t disclosed in the of Title 35, Unit Office all inform 1.56 which occur	insofar as the prior United States Codnation known red between t	States application in e, §112, I acknowled to me to be material the filing date of the	ch of the clair the manner pr lge the duty to to patentabili	ns of covided o ty as
(Application Seri	ial No.)	Filing Date)	(Statu (patented, pend	s) ing, abandoned)	
(Application Seri	ial No.)	(Filing Date)	(Statu (patented, pend	s) ing, abandoned)	



I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

60/173,631	12/30/99
(Application Serial No.)	(Filing Date)

Direct all telephone calls to <u>Frank E. Morris</u> at (650) 493-4935. Address all correspondence to:

PENNIE & EDMONDS LLP 3300 Hillview Avenue Palo Alto, CA 94304

File No. <u>9824-032-999</u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor:	Joel D. Medlock
Inventor's signature:	
Date:	
Residence:	15745 Shannon Road, Los Gatos, CA 95032
Citizenship:	United States
Post Office Address:	Same as above.

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